

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 1
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) SEAL PAC SUPPORTING ELECTING AMERICAN LEADERS PAC		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00570226 </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee MWPolitical, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 26 / 2020	
Mailing Address 114 Karland Dr NW		Amount 25000.00	
City Atlanta	State GA	Zip Code 30305-1126	Transaction ID : E24BC40F378B74106A01
Purpose of Expenditure Digital Advertising	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 08 / 26 / 2020	
Name of Federal Candidate Nehls, Troy, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 22 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee MWPolitical, Inc.		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 26 / 2020	
Mailing Address 114 Karland Dr NW		Amount 25000.00	
City Atlanta	State GA	Zip Code 30305-1126	Transaction ID : E8D80627F18DD4D99860
Purpose of Expenditure Digital Advertising	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 08 / 26 / 2020	
Name of Federal Candidate Bolduc, Donald, C., ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	50000.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	50000.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Kilgore, Paul, , ,

[Electronically Filed]

Date

 MM / DD / YYYY
 08 / 26 / 2020

Signature